

LOS ANGELES COUNTY COMMISSION ON HIV

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JOINT PU-BLIC POLICY (JPP) COMMITTEE MEETING MINUTES

January 7, 2009



MEMBERS PRESENT	MEMBERS ABSENT	PUBLIC	HIV EPI AND OAPP STAFF	COMM STAFF/ CONSULTANTS
Whitney Engeran-Cordova,	Lee Kochems, Co-Chair	Jasmine Burnett	Elizabeth Escobedo	Julie Cross
Co-Chair	Dean Page	Jerod Durham	Douglas Frye	Carolyn Echols-Watson
Kyle Baker	Ron Snyder	Kimberlee Woods	William Strain	Jane Nachazel
Carrie Broadus	Chris Villa			Craig Vincent-Jones
Jeffrey Goodman				
Manuel Negrete				
James Skinner				
Kathy Watt				

CONTENTS OF COMMITTEE PACKET

- 1) Agenda: JPP Committee Agenda, 1/7/2009
- 2) Minutes: JPP Committee Minutes, 12/3/2008
- 3) **Policy/Procedure**: Non-Commissioner Committee Appointment, 1/11/2007
- 4) **Memorandum**: Standards of Care Committee Guidelines for Nomination of Non-Commission Committee Members, 12/3/2006
- 5) **Memorandum**: Public Policy Committee Recommendation to Establish Joint Public Policy (JPP) Committee with Prevention Planning Committee (PPC), 7/10/2007
- 6) **Policy Brief**: Information on Medicare Part B Gap Assistance Program, 1/6/2009
- 7) Talking Points: Senate Bill 1184: Laboratory Reporting of CD4+ T-Cell Tests, Office of AIDS
- 8) Letter: New California Law Requiring CD4 Reporting, California Department of Public Health, 12/19/2008
- 9) **Summary**: HIV Reporting Stakeholders Meeting, 4/9-10/2008
- 10) Letter: CD4 Reporting Requirements, County of Los Angeles Public Health, HIV Epidemiology Program, 12/19/2008
- 11) Fact Sheet: HIV/AIDS Surveillance, CDC July 2008
- 12) Matrix: Public Policy Issues Docket, 1/7/2009
- 13) Column: New Rule Hurts Women, 12/26/2008
- 1. **CALL TO ORDER**: Mr. Engeran called the meeting to order at 2:20 pm.
- 2. APPROVAL OF AGENDA:

MOTION #1: Approve the Agenda Order, as amended (*Passed by Consensus*).

3. APPROVAL OF MEETING MINUTES:

MOTION #2: Approve 12/3/2008 JPP Committee meeting minutes, as presented (*Passed by Consensus*).

- 4. **PUBLIC COMMENT, NON-AGENDIZED**: There were no comments.
- 5. COMMITTEE COMMENT, NON-AGENDIZED:
 - Mr. Goodman spoke on the Major Medical Insurance options available and the poor coverage for those able to pay a modest premium. He pointed out, the limited coverage results in consumers' using Ryan White-funded care for health services.

- Mr. Goodman talked about medical insurers' various definitions and fees for "reasonable and customary" services. Health
 care providers assess different fees for the same services. Additionally, a healthcare provider charges varying fees based on
 the type of policy issued.
- Ms. Broadus identified a recently initiated Health and Human Services (HHS) administrative rule based on "provider conscience". This rule allows health care providers (receiving federal funds) to decline services based on their religious beliefs and/or moral values. Ms. Broadus is concerned this regulation could harm PLWH/A health care. It was noted the new administration was aware of this regulation and would work to nullify it.
- The was agreed to refer the health insurance issues to the Health Reform Work Group.
- The was agreed to send a letter to the Board of Supervisor opposing the HHS rule.

6. CO-CHAIRS' REPORT:

A. Co-Chair Elections: Mr. Engeran-Cordova and Mr. Kochems were nominated. Mr. Engeran-Cordova stated this would be his last term. He encouraged the committee to begin succession planning for the Co-Chair position.

MOTION #3: Mr. Engeran-Cordova and Mr. Kochems were re-elected Committee Co-Chairs (*Passed by Consensus*).

7. COMMITTEE MEMBERSHIP:

- Mr. Vincent-Jones discussed non-Commissioner appointments to the JPP committee. It was noted the Committee's current criteria for non-commissioner members is as follows.
 - o Appointed by the Prevention and Planning Council (PPC) as their representative.
 - Description Limited to a one year term.
 - The total number of non-Commission committee members must be fewer than the total number of Commission members on the Committee.
- There was discussion regarding the addition of criteria that would encourage membership retention as well as expansion of non-Commission committee members. It was felt that enhancing the criteria for non-Commission committee members would allow for greater engagement by interested stakeholders in the policy decision-making process.
- Tit was agreed Mr. Vincent-Jones and Mr. Engeran-Cordova would develop additional criteria to propose to the Committee.

8. PUBLIC BENEFITS:

A. Early Treatment for HIV Act (ETHA): Mr. Engeran-Cordova discussed an order signed by the Governor to enroll HIV consumers in Medi-Cal. The State did not implement the order. AIDS Healthcare Foundation (AHF) has sued the State on the issue. The State was found liable and a judgment was entered against them. The judgment is not yet been determined. AHF is currently preparing recommendations due to the court by January 31st. Mr. Engeran-Cordova invited committee members to provide suggestions on solutions that will be offered to the court.

B. Medicare Part D/TrOOP:

- The Medicare Part D benefit cycle starts over every year. Only one consumer accessed the Medicare Part B Gap Assistance program created in 2008 to assist consumers that find themselves in the "Donut Hole". As a result the following actions will be taken by the Committee.
- **○** A letter will be sent to agencies requesting the following information.
 - o Were there consumers served by your organization that fell into the "donut hole"?
 - o If so, how did they get out of the "Donut Hole"?
 - o How was medication received while in the "Donut Hole"?
- Tt was agreed the Committee would prepare a white paper on the support of TrOOP legislation.
- The Committee wants to raise the issue at AIDSWatch in April
- The Committee will encourage consumers' advocacy using the "change.gov" website.

C. Medicare Part B:

Ms. Cross reported on the Medicare Part B Gap Assistance Program temporarily established by COH and OAPP to offset the loss of State monthly Medicare Part B premium payments for those with Medi-Cal shares-of-cost over \$500. In January, those consumers who are impacted by premium payment changes can receive \$90 in food vouchers through the program. The vouchers will be distributed by AIDS Project Los Angeles, AIDS Service Center, AltaMed, Northeast Valley Health Corporation and St Mary's Medical Center. Ms. Cross is investigating other possible longer-term solutions. This temporary solution is thought to prevent patients from dropping/canceling their coverage as well as prevent consumers from accessing medical outpatient care which could result in a dependency on County and Ryan White-funded care.

- The agency selection process for the voucher distribution was discussed. Ms Broadus felt the agency criteria should be detailed because none were in SPA 6. Mr. Vincent-Jones responded that the decisions were based on case management programs that had the capacity to absorb the extra work and where there were the highest proportions of impacted clients.
- Ms. Cross supported broad coverage, especially where Medicare clients are high, but quick response was required due to the limited time of the program. Agencies were selected that could serve the largest capacity of consumers.
- The assistance program ends in February 2009. Ms Cross will continue seeking a permanent solution to this issue. Ms. Cross submitted a proposal to CMS (a third party payer of Medi-Cal premiums.) as a permanent solution. She is currently awaiting their response.
- A recommendation was made to translate the Medicare Part B policy brief into Spanish.
- OAPP staff will do the Spanish translation and distribution will be encouraged at such venues as outpatient clinics and pharmacies.

9. HIV SURVEILLANCE:

- Dr. Frye reported 13,000 HIV/non-AIDS and 4,000 AIDS name-based cases have been submitted since April 2006.
 Approximately 8,000 cases still need to be investigated.
- Due to an amendment to the CDC-LAC Code-to-Name Based HIV Reporting Transition Plan, HIV Epidemiology was able to match 700 code-based Kaiser Permanente case reports with laboratory names that were previously not re-reported since the passage of SB 699. 600 cases that Kaiser claims to have reported by name are still in dispute.
- County Counsel has said that SB 699 does not allow the County to force providers to re-report its coded cases. HIV EPI staff
 continue to work with Kaiser to report as many cases as possible within CDC and County Counsel guidelines.
- December 31st was the deadline for reauthorization data though Dr. Frye would like extension to 2009. Dr. Frye reported a
 letter has been sent to clinical laboratories on their CD4 reporting responsibilities.
- There are State work groups on centralized reporting for laboratories with locations in multiple counties and on uses of surveillance data including for partner notification. Michelle Roland continues to stress stakeholder participation. Incidence reporting, needed to predict the epidemic, was discussed at two state surveillance meetings.
- CSTD has developed a paper on presumed heterosexual risk for women and the CDC is working on it. It is more complicated for men. HIV Epidemiology does develop local statistics. The subject will be discussed at the state meeting in June.
- → Mr. Vincent-Jones agreed to explore the possibility of a County technical amendment to legislation that would allow HIV and AIDS to be treated as one disease for regulatory purposes.
- Tt was agreed to form a Surveillance Work Group to address surveillance funding, viewing HIV and AIDS as one disease, and transition extension with Mr. Baker, Ms. Broadus, Mr. Engeran-Cordova, Dr. Frye, and Ms. Watt.
- **○** Dr. Frye will follow-up on the recent CDC meeting on social determinants.

10. **STATE BUDGET**:

- A. **FY 2008-2009 Budget**: Ms. Cross reported the Governor was trying to cut the current budget even as he releases his FY 2009-10 proposed budget. The reductions are similar for both the remaining FY 2008-09 budget and the FY 2009-10 budget. They both include reductions to the Aged and Disabled Medi-Cal Program, IHSS and SSI.
- B. Governor's Proposed FY 2010 Budget: The Governor proposes funding for ADAP through the drug rebate program. Revenue is estimated to be \$85 million. Rebates are negotiated with pharmaceutical companies. Although rebate funds would be directed to funding the operations of ADAP, State General Funds used to fund ADAP could be reallocated to other programs. This could result in a reduction in funding for ADAP.
- 11. **PUBLIC POLICY ISSUES DOCKET**: The JPP Annual Legislative Review will be held on March 4, 2009 from 12:00 noon to 5:00 pm. Legislation will be forwarded to Committee members in advance of the meeting as it becomes available.
- 12. HIV/STD CONTROL IN THE ADULT FILM INDUSTRY: An author for the legislation is still being sought.

13. **CORRECTIONS**:

- Mr. Vincent-Jones said the Corrections workgroup identified issues in jails as well as Federal/State prisons, but additional research is required on the Immigration and Customs Enforcement (ICE), Youth Corrections, and federal issues. He suggested more expertise to assist the workgroup. Mr. Negrete volunteered to be part of the workgroup.
- Ms. Watt recommended Sophia Rumanes report on the County jail program funded with CDC resources for African-American Testing in Medical Settings. Additionally, K6G now has a program that allows tested inmates to transfer out for three days to do outreach.

14. **HEALTHCARE REFORM**: Ms. Cross is developing a draft paper regarding major healthcare reform issues relevant to HIV/AIDS for the Healthc Reform workgroup to review. The group consists of Ms. Broadus, Ms. Cross, Mr. Goodman, Ms. Jackson, Mr. Lambert, Mr. Nolledo, and Ms. Watt.

15. RYAN WHITE REAUTHORIZATION ISSUES:

- Mr. Baker reported on a nationwide call with 141 invited stakeholders hosted by the Obama Transition Team. The teleconference issues included
 - 1) What has worked or not,
 - 2) Potential collaborative efforts.
 - 3) Main themes including the national AIDS strategy,
 - health care policy development
 - Street CDC/prevention funding
 - Reauthorization issues
- Ms. Watt contributed to the teleconference and spoke on the intersection of HIV and substance abuse, and advocated for a
 universal CDC/HRSA/NIH/SAMHSA intake and assessment mechanism.
- Mr. Baker reported on a Federal AIDS Policy Partnership Hold Harmless Sub-Work Group. Some favored a one-year rather than a three-year reauthorization to redress issues.
- Mr. Vincent-Jones addressed the committees' current efforts to follow-up on the Commission's Ryan White Reauthorization Principles. Currently the Committee has several workgroups to address six different issues pursuant to the Principles.
- 16. WORK PLAN: There was no report.
- 17. **ANNOUNCEMENTS**: Mr. Engeran-Cordova announced AHF did 1+ million tests with about 6% HIV+ in over 12 countries with some 600 partners during World AIDS Day week. They are committing to 40,000 County tests outside government contracts in the next 12 months to reduce those unaware of their status by 6% and anticipate a 2% positive rate. They have new mobile vans for a total of four and are opening new sites at Out of the Closet stores, and seek 10 partners to do 1,500 tests each.
- 18. **ADJOURNMENT**: The meeting was adjourned at 5:00 pm.